STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Corson/Sioux County News-Messenger		2. DATE OF FILING Oct 1, 20—
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 51	3B. ANNUAL SUBSCRIPTION PRICE $24 local $28 others

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION *(Street, City, County, State and ZIP+4 Code) (Not printers)*
200 First Avenue West, Corson County, S.D Zip 57642-0788

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER *(Not printer)*
Corson/Sioux County News-Messenger, Box 788, McLaughlin S.D. 57642

6. FULL NAME OF PUBLISHER:
Merle E Lofgren

7. OWNER *(If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.*

FULL NAME	COMPLETE MAILING ADDRESS
Merle E Lofgren	Box 788 McLaughlin S.D 57642

8. KNOWN BONDHOLDERS, MORTGAGEES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS. MORTGAGES OR OTHER SECURITIES *(If there are none, so state. If more space is needed, list on back of this form)*
None

9. EXTENT AND NATURE OF CIRCULATION *(See instructions on reverse side)*	AVERAGE NO. COPIES EACH ISSUE D PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUE NEAREST TO FILING DATE
A. TOTAL NO. COPIES *(Net Press Run)*	1600	1600
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales	265	265
2. Mail Subscription *(Paid and or requested)*	1090	
C. TOTAL PAID AND/OR REQUESTED CIRCULATION *(Sum of 10B1 and 10B2)*	1355	1353
D. FREE DISTRIBUTION BY MAIL, CARRIER OR OTHER MEANS	65	80
SAMPLES, COMPLIMENTARY, AND OTHER FREE COPIES	15	
E. TOTAL DISTRIBUTION *(Sum of C and D)*	1435	1435
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	165	162
2. Return from News Agents		
G. TOTAL *(Sum of E, F1 and 2 -- should equal net press run shown in A)*	1600	1600

I swear that the statements made by me above are correct and complete.

SIGNATURE AND TITLE OF PUBLISHER, BUSINESS MANAGER OR OWNER
Merle E Lofgren

State of South Dakota)
: S
County of Corson)

(Seal)

Sworn to before me this 5 day of October, 20—

Sheila Buechler
Notary Public

My commission expires 02-24-2006

Form: SOS REC 051 01/93